## SELF-EMPLOYMENT LEDGER

\*\*This form must be completed correctly or it will be returned\*\*

RECIPIENT NAME_				
BUSINESS NAME				
DATES COVERED _		15th THROUGH		
HOURS WORKED TI	HIS REPORTING PERIOD _			
GROSS INCOME	\$	_	「 <u></u>	
minus TOTAL EXPENSES	\$	** cost i	***DSS REMINDER: Business shelten nust be deducted if business property	÷r
ADJUSTED INCOME		_	is connected to the home property.**	*

\*\*Allowable Business Expenses: Most business expenses may be subtracted from your selfemployment income, but not all the expenses can be. Please contact your caseworker if you have any question on whether or not to list a business expense below.

Examples of expenses that are allowed and could be listed include:

- Amounts paid for items needed in the business such as supplies, repairs, advertising, feed, seeds, fertilizer, etc.
- Amounts paid for income-producing real estate, capital assets, equipment, machinery, and other durable goods required for the self-employment business. [Capital assets and durable goods are generally objects used in business that are expected to last a long time such as tractors, combines, buildings, etc.]
- If the home is connected to the business property (farm), only the business portion of shelter expenses may be used as a deduction.
- If the business meets office in the home requirements, the business portion of shelter expenses may be used as a deduction if the household requests it.

Examples of expenses that are NOT allowed and should NOT be listed include:

- Monthly telephone charge unless there is a separate business phone [long distance telephone charges that are business related may be deducted however].
- Mileage expenses from the home to the first and last work location cannot be deducted, even if the business is located in the home. [Mileage deductions are only allowed for trips between business sites, not for commuting from the home to the business.]

INCOME (MONEY RECEIVED BY RECIPIENT)		EXPENSE (COSTS OF SELF-EMPLOYMENT)			
DATE RECEIVED	TYPE OF INCOME	AMOUNT RECEIVED	DATE PAID	TYPE OF EXPENSE	AMOUNT PAID

Use back side if more space is needed

INCOME (MONEY RECEIVED BY RECIPIENT)		EXPENSE (COSTS OF SELF-EMPLOYMENT)					
DATE RECEIVED	TYPE OF INCOME	AMOUNT RECEIVED	DATE PAID	TYPE EXPEN		AMOUNT PAID	
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I certify that I have receipts or some type of verification on file for all income and expenses reported on this form, and I will keep them on file for at least one year from date reported.  I declare and affirm under the penalties of perjury that the information has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.							
Signature (if completing electronically, type name)					Date Signe	d	